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## BIB DATA SHEET

CONFIRMATION NO. 1183

| SERIAL NUMBER  | FILING or 371(c)<br>DATE  | CLASS                                     | GROUP ART UNIT  | ATTORNEY DOCKET<br>NO.    |                                |
|--|---|---|---|---------------------------|--------------------------------|
| 09/731,899   | 12/08/2000<br>RULE  | 435                                       | 1645  | 20555/1203433-US1         |                                |
| <b>APPLICANTS</b><br>Benjamin Chain, London, UNITED KINGDOM;<br><b>** CONTINUING DATA *****</b><br>This appln claims benefit of 60/169,687 12/08/1999<br><b>** FOREIGN APPLICATIONS *****</b><br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b><br>06/22/2005 |   |   |   |                           |                                |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Verified and Acknowledged <u>/ROD P. SWARTZ/</u><br>Examiner's Signature             | <input type="checkbox"/> Met after Allowance<br>Initials  | <b>STATE OR COUNTRY</b><br>UNITED KINGDOM | <b>SHEETS DRAWINGS</b><br>2   | <b>TOTAL CLAIMS</b><br>20 | <b>INDEPENDENT CLAIMS</b><br>1 |
| <b>ADDRESS</b><br>DARBY & DARBY P.C.<br>P.O. BOX 770<br>Church Street Station<br>New York, NY 10008-0770<br>UNITED STATES  |   |   |   |                           |                                |
| <b>TITLE</b><br>Chimeric peptides as immunogens, antibodies thereto, and methods for immunization using chimeric peptides or antibodies  |   |   |   |                           |                                |
| <b>FILING FEE RECEIVED</b><br>685  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                           |                                |